ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	10-3-000
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	MT	523	04/10/01

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim Final	Original	Date										Claim Final	Original	Date									Claim Final	Original	Date								
	1												51											101									
	2	✔	✔	✔	✔								52											102									
	3												53											103									
	4												54											104									
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	12												62											112									
	13	✔	↓	↓									63											113									
	14		✔	✔									64											114									
	15	N	N										65											115									
	16												66											116									
	17												67											117									
	18	↓											68											118									
	19	N	N										69											119									
	20	/											70											120									
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	49												99											149									
	50												100											150									

If more than 150 claims or 10 actions
staple additional sheet here

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